



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

March 7, 2012

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These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Grants and Demonstrations

The ACA provides funding opportunities to transform how health care is delivered, expand access to care and support healthcare workforce training.

Grant Announcements

AHRQ Mentored Career Enhancement Award in Patient Centered Outcomes Research (PCOR) for Mid-Career and Senior Investigators (K18), \$6301. Announced March 1, 2012. Agency for Healthcare Research and Quality (AHRQ) funding is available to train established research investigators who are interested in developing skills in comparative effectiveness research methodology and applying those methods to patient-centered outcomes research. Eligible applicants include mid-career and senior investigators holding a research or health professional doctorate who have established records of research grant funding and are affiliated with an institution with any of the following characteristics: public or non-profit private institution, such as a university, college, or a faith-based or community-based organization; units of local or state government; eligible agencies of the federal government; Indian/Native American Tribal Government; or Indian/Native American Tribally Designated Organizations. The number of awards and total amount awarded will depend upon the quality of applications received and the availability of funds. Applications can be submitted 5/2/12, 12/18/12, 12/18/13 and 12/18/14.

The announcement can be viewed at: Grants.gov

Nurse Anesthetist Traineeship Program (NAT), \$5308. Announced February 29, 2012. Funding is available to provide traineeship support for licensed registered nurses enrolled as full-time students in a master's or doctoral nurse anesthesia program. Eligible applicants include schools of nursing, nursing centers, academic health centers, State or local

governments and other public or private nonprofit entities. Eligible entities will provide traineeships that will pay for all or part of the costs of tuition books and fees, and reasonable living expenses of the individual during the traineeship. Students are eligible for traineeships in the first or second year of an accredited nurse anesthesia education program. HRSA expects to make 100 awards with estimated program funding of \$2.25M during federal fiscal year 2012. Applications are due March 29, 2012.

The announcement can be viewed at: [HRSA](#)

Guidance

3/1/12 DOL has announced a two-week extension of the comment period on its proposed rule requiring multiple employer welfare arrangements (MEWAs) to register with the department.

The proposed rule implements §6606 and §6605 of the ACA and targets fraud in certain employer-based healthcare plans known as MEWAs, or multiple-employer welfare arrangements. Designed to give small employers access to low cost health coverage on terms similar to those available to large employers, MEWAs are arrangements that provide health and welfare benefits to two or more unrelated employers. However, DOL says that MEWAs have been rife with fraud and the policies have been able to circumvent state laws that require plans to keep enough funds readily available to pay claims. Under the proposed rule, the Secretary of Labor is given a new set of enforcement tools to protect employers, health care providers and workers from mismanaged multiple-employer welfare arrangements (MEWAs) that fail to pay legitimate claims or embezzle premium dollars.

Read the proposed rule in the December 2011 Federal Register at:

<http://www.regulations.gov/#!documentDetail;D=EBSA-2011-0028-0001>

Comments on the proposed rule are now due **March 19, 2012**. There was an error in the preamble published in the Federal Register in December 2011 that incorrectly listed the EBSA email address. As a result, EBSA recommends that comments sent electronically prior to February 22, 2012 should be resent to the correct email address.

For more information see the news release at:

<http://www.dol.gov/ebsa/newsroom/2012/EBSA030112.html>

Prior guidance can be viewed at www.healthcare.gov

News

3/5/12 The Society of General Internal Medicine (SGIM) is launching an independent commission to assess how physicians are paid and how payment incentives are linked to patient care. The National Commission on Physician Payment Reform will issue recommendations on how to reform the physician payment system in an effort to reduce health care costs while also maximizing clinical outcomes for patients. In early 2013 the Commission expects to issue a report with recommendations on how to reform the physician payment system in order to slow rising health system costs but optimize patient outcomes.

The 13-member panel is chaired by Steven Schroeder of the University of California-San Francisco, who previously served as chairman of the Robert Wood Johnson Foundation and former Senate Majority Leader William Frist is honorary chairman. Commissioners include physicians, health system executives, business leaders and policy experts. JudyAnn Bigby, M.D., Secretary of the Executive Office of Health and Human Services for Massachusetts is a member of the Commission. The Commission will analyze issues related to physician compensation including new payment models such as accountable care organizations (ACOs),

patient centered medical homes and value based purchasing. They also plan to assess initiatives under the ACA as well as efforts to incorporate quality into the current payment delivery system.

For more information read the SGIM press release at: [Press Release](#)

3/2/12 CMS announced that New Hampshire is the first state to receive funding under ACA §10202, the State Balancing Incentive Payments Program. The program provides a strong financial incentive to stimulate greater access to non-institutionally based long-term services and supports. Through this initiative, New Hampshire will receive \$26.5 million over 3 years in the form of enhanced Medicaid matching payments. The new grant program is part of an ongoing effort by CMS and States to expand home and community-based services and supports. To be eligible, a state must now spend less than 50 percent of its total Medicaid long-term care funds on community-based options. States are required to outline plans for expanding services and making structural changes to their delivery systems.

A total of \$3 billion in grant funding, announced in September 2011, is available to states for this program in the form of higher Medicaid matching payments. Applications for participation in the opportunity will be accepted from Medicaid agencies on an ongoing basis beginning October 1, 2011 through August 1, 2014 or until the full provision of the \$3 billion has been expended, whichever is earlier.

For information on the State Balancing Incentive Payments Program:

<https://www.cms.gov/smdl/smd/itemdetail.asp?itemid=CMS1252041>

For the press release on the New Hampshire Award:

[Press Release](#)

2/27/12 Created under §6301 of the ACA, the Patient-Centered Outcomes Research Institute, or PCORI, held a National Patient and Stakeholder Dialogue as part of its effort to obtain feedback on its first draft National Priorities for Research and initial Research Agenda. PCORI is an independent nonprofit tasked with conducting patient-centered outcomes research and the Institute is asking the public to help define that term. PCORI was created to conduct research to provide information about the best available evidence to help patients and their health care providers make more informed decisions. PCORI will update its definition based on public feedback from individuals and organizations and use the research agenda to guide future funding announcements for comparative effectiveness research.

The Stakeholder Dialogue event included two moderated discussion panels of patient and caregiver advocates, clinicians, health insurers, employers, drug makers and other stakeholders as well as time for PCORI to hear public comments on the draft documents. Input from the Stakeholder Dialogue event, and comments received through PCORI's website will be considered in modifications to the draft research priorities and agenda.

The draft National Priorities for Research, released in January 2012, listed 5 areas where this research is needed to support decision-making: 1) Assessment of options for prevention, diagnosis, and treatment; 2) improving health care systems; 3) communication and dissemination research; 4) addressing disparities; and 5) accelerating patient-centered outcomes research and methodological research. Comments will be accepted until March 15, 2012 before a final version is adopted.

Comments on the draft National Priorities and Research Agenda are due March 15 and can be submitted through the PCORI website at: <http://www.pcori.org/survey/priorities-agenda/>

Read PCORI's draft National Priorities for Research and initial Research Agenda at: [Agenda](#)

View the event agenda at: <http://www.pcori.org/assets/Agenda-FINAL.pdf>

View the event Presentation at: [Presentation](#)

View the archived event webcast at: <http://www.visualwebcaster.com/event.asp?id=84669>

(Note: also see the **Grant Announcement** section for a new funding opportunity)

EOHHS News

2/16/12 MassHealth's final proposal for a State Demonstration to Integrate Care for Dual Eligible Individuals was submitted to CMS

on February 16, 2012. The final Demonstration Proposal and accompanying documents are posted at: www.mass.gov/masshealth/duals, under Demonstration Proposal. In addition, CMS posted the proposal at: <http://www.integratedcareresourcecenter.com/icmstateproposals.aspx> on February 17. CMS is seeking public comment through a 30-day notice period. During this time interested individuals or groups may submit comments to help inform CMS' review of the proposal. To be assured consideration, **please submit comments by 5:00 PM, March 19**. You may submit comments on this proposal to: MedicareMedicaidCoordination@cms.hhs.gov.

Upcoming Events

Quarterly Affordable Care Act Implementation Stakeholder Meeting

The topic for this meeting will be Essential Health Benefits

Monday, March 12, 2012 from 2:00 PM- 3:00 PM

1 Ashburton Place, 21st Floor

Boston, MA

***Please note the new time**

Integrating Medicare and Medicaid for Dual Eligible Individuals Topical Workgroups

MassHealth is convening workgroups on specific Duals Demonstration implementation topics to support the next phase of the initiative. Stakeholders wishing to participate should RSVP to duals@state.ma.us by **5:00 PM, March 12**. Please provide your name, organizational affiliation (if any), and the name of the workgroup you would like to join. Participants should be prepared to engage in focused discussion and offer constructive input. To ensure productive working sessions, we request that organizations identify the best representative to attend each workgroup. The workgroup topics and meeting schedule is below.

Quality Metrics

Tuesday, March 13, 2012

10:00 AM - 12:00 PM

1 Ashburton Place, 21st floor, Boston

Grievances and Appeals

Thursday, March 15, 2012

2:00 PM - 4:00 PM

1 Ashburton Place, 11th floor, Matta Conference Room, Boston

Assessment and Care Planning

Friday, March 16, 2012

10:00 AM - 12:00 PM

State Transportation Building, Conference Rooms 1, 2, & 3

Second Floor, 10 Park Plaza, Boston

Independent LTSS Coordinator

Friday, March 16, 2012

2:00 PM - 4:00 PM

State Transportation Building, Conference Rooms 1, 2, & 3
Second Floor, 10 Park Plaza, Boston

Enrollment

Friday, March 23, 2012
2:00 PM - 4:00 PM
1 Ashburton Place, 21st floor, Boston

Workgroups may be convened in the future on additional topics. Reasonable accommodations will be made for participants who need assistance. In your RSVP to duals@state.ma.us, please note any request for accommodations

Integrating Medicare and Medicaid for Dual Eligible Individuals Open Meeting

April 9, 2012, 10:00 AM - 12:00 PM
State Transportation Building, Conference Rooms 1, 2, & 3, Second Floor, 10 Park Plaza, Boston

The purpose of this open meeting will be to discuss next steps in the State Demonstration to Integrate Care for Dual Eligible Individuals, following topical workgroup and other activities occurring in March.

Attendance is welcome from all stakeholders and members of the public with interest in this proposed Demonstration. Reasonable accommodations will be made for participants who need assistance. Please send your request for accommodations to Donna Kymalainen at Donna.Kymalainen@state.ma.us.

Insurance Market Reform Work Group Open Stakeholder Meetings

The Insurance Market Reform Work Group, co-chaired by the Health Connector and the Division of Insurance, is hosting a series of open meetings to solicit feedback on a range of topics under its purview. The meeting schedule and proposed topics are highlighted below.

Essential Health Benefit (EHBs) approach and options; Catastrophic Health Plan; and Child Only plans

March 9, 2012
10:00 - 11:30 a.m.
1000 Washington Street, Boston
Hearing Room E, DOI Offices

Research to study the impact of ACA changes to the size of the small group market (from 1-50 to 1-100); and Changes to rating factors (e.g., group size adjustment, age bands, industry code, etc)

March 23, 2012
10:00 - 11:30 a.m.
1000 Washington Street, Boston
Hearing Room E, DOI Offices

Follow-up meeting on Essential Health Benefits approach and options

April 6, 2012
10:00 - 11:30 a.m.
1000 Washington Street, Boston
Hearing Room E, DOI Offices

Follow-up meeting about research to study the impact of ACA changes to the size of the small group market; and Changes to rating factors (e.g., group size adjustment,

age bands, etc.)

April 27, 2012

10:00 - 11:30 a.m.

1000 Washington Street, Boston

Hearing Room E, DOI Offices

Potential ACA changes including open enrollment/special enrollment, eligibility appeals, termination, uniformity of forms

May 11, 2012

10:00 - 11:30 a.m.

1000 Washington Street, Boston

Hearing Room E, DOI Offices

Other issues (TBD)

May 25, 2012

10:00 - 11:30 a.m.

1000 Washington Street, Boston

Hearing Room E, DOI Offices

3 R's Working Group Stakeholder Session to Discuss ACA Provisions Related to Reinsurance, Risk Adjustment and Risk Corridors

1000 Washington Street, Boston

Hearing Room E, DOI Offices

If any interested persons are unable to attend the meetings in person, they can participate in the session by calling the number below.

Dialing Instructions

Dial 1-877-820-7831

Pass Code 371767# (please make sure to press # after the number)

Bookmark the **Massachusetts National Health Care Reform website**

at: <http://mass.gov/national health reform> to read updates on ACA implementation in Massachusetts.

Remember to check <http://mass.gov/masshealth/duals> for information on the **"Integrating Medicare and Medicaid for Dual Eligible Individuals"** initiative.